APPLICATION DATA SHEET

APPLICATION INFORMATION

Applicati n Type:: Regular
Subject Matter:: Utility

CD-ROM or CD-R?:: None

Number of CD disks:: 0

Number of copies of CDs:: 0

Sequence submission?:: None

Computer Readable Form (CRF)?:: No

Number of copies of CRF:: 0

Title:: TREATMENT OF HIV INFECTION

THROUGH COMBINED

ADMINISTRATION OF TIPRANAVIR

AND CAPRAVIRINE

Attorney Docket Number:: 9/269

Request for Early Publication?:: No

Request for Non-Publication?:: No

Total Drawing Sheets:: 0

Small Entity?::

Petition included?:: No

Secrecy Order in Parent Appl.?:: No

APPLICANT INFORMATION

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Germany

Status:: Full Capacity

Given Name:: Ulrich

Middle Name:: Waiter

Family Name:: DREES

City of Residence:: Ingelheim
Country of Residence:: Germany

Street of mailing address:: Binger Strasse 173

City of mailing address:: Ingelheim

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C untry f mailing address:: Germany

Postal or Zip Code of mailing addr ss:: 55216

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Douglas
Middle Name:: Lytle

Family Name:: MAYERS
City of Residence:: Newtown

State or Province of Residence:: CT
Country of Residence:: US

Street of mailing address:: 9 Oak Ridge Drive

City of mailing address:: Newtown

State or Province of mailing address:: CT
Country of mailing address:: US

Postal or Zip Code of mailing address:: 06470

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Scott

Family Name:: McCALLISTER

City of Residence:: Westport

State or Province of Residence:: CT
Country of Residence:: US

Street of mailing address:: 900 Ridgebury Road

City of mailing address:: Ridgefield

State or Province of mailing address:: CT
Country of mailing address:: US

Postal or Zip Code of mailing address:: 06877

CORRESPONDENCE INFORMATION

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C rresp ndenc Custom r Numb r:: 28509

REPRESENTATIVE INFORMATION

Representative Customer Number:: 28509

ASSIGNEE INFORMATION

Assignee name:: Boehringer Ingelheim Pharmaceuticals, Inc.

Street of mailing address:: 900 Ridgebury Road, P. O. Box 368

City of mailing address:: Ridgefield

State or Province of mailing address:: CT

Country of mailing address:: US

Postal or Zip Code of mailing address:: 06877-0368